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APPLICATION NUMBER	FILING OR 371 (c) DATE	FIRST NAMED APPLICANT	ATTY. DOCKET NO./TITLE
09/934,845	08/23/2001	Eiichi Kitazume	6161.0256.US

**CONFIRMATION NO. 9113**

23345  
 MCGUIREWOODS, LLP  
 1750 TYSONS BLVD  
 SUITE 1800  
 MCLEAN, VA 22102



\*OC000000015780655\*

Date Mailed: 04/19/2005

**NOTICE OF ACCEPTANCE OF POWER OF ATTORNEY**

This is in response to the Power of Attorney filed 04/11/2005.

The Power of Attorney in this application is accepted. Correspondence in this application will be mailed to the above address as provided by 37 CFR 1.33.

JOHN INGRAM  
 PUBS O-

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APPLICATION NUMBER	FILING OR 371 (c) DATE	FIRST NAMED APPLICANT	ATTY. DOCKET NO./TITLE
09/934,845	08/23/2001	Eiichi Kitazume	Q65909

SUGHRUE, MION, ZINN, MACPEAK & SEAS  
2100 Pennsylvania Avenue, N.W.  
Washington, DC 20037-3202



\*OC000000015780619\*

Date Mailed: 04/19/2005

**NOTICE REGARDING CHANGE OF POWER OF ATTORNEY**

This is in response to the Power of Attorney filed 04/11/2005.

- The Power of Attorney to you in this application has been revoked by the assignee who has intervened as provided by 37 CFR 3.71. Future correspondence will be mailed to the new address of record(37 CFR 1.33).

JOHN INGRAM  
PUBS (-)

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CONFIRMATION NO. 9113

Bib Data Sheet

SERIAL NUMBER 09/934,845	FILING OR 371(c) DATE 08/23/2001 RULE	CLASS 428	GROUP ART UNIT 1775	ATTORNEY DOCKET NO. 6161.0256.US
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## APPLICANTS

Eiichi Kitazume, Tokyo, JAPAN;

## \*\* CONTINUING DATA \*\*\*\*\*

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

JAPAN 2000-255781 08/25/2000

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 10/02/2001

Foreign Priority claimed	<input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	JAPAN	4	15	2
Verified and Acknowledged	Examiner's Signature _____ Initials _____				

## ADDRESS

23345

## TITLE

METAL MASK STRUCTURE AND METHOD FOR MANUFACTURING THEREOF

FILING FEE RECEIVED 1010	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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